This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21.

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 56-R-0001
CUSTOMER NUMBER: 925

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Medical University Of South Carolina
Div Of Lab Animal Res/Dept Of Comparative Medicine
114 Doughty Street
Po Box 250777
Charleston, SC 29425

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

Strom Thurmond Building Children's Research Institute

FACILITY LOCATIONS (Sites) - See Atached Listing

Quad E

| A.  Animals Covered By The Animal Welfare Regulations | В.   | Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
|---|--|--|---|--|--|--|
| 4. Dogs   |  |  |   |  |  |  |
| 5. Cats   |  |  |   |  |  |  |
| 6. Guinea Pigs  |  |  |   |  |  |  |
| 7. Hamsters   |  |  |   |  |  |  |
| 8. Rabbits  |  |  | 112   | 231  |  | 343  |
| 9. Non-human Primates                                 |  |  |   |  |  |  |
| 10. Sneep   |  |  |   |  |  |  |
| 11. Pigs  |  |  |   | 176  |  | 176  |
| 12. Other Farm Animals                                |  |  |   |  |  |  |
| Goats   |  |  |   | 3  |  | 3  |
| 13. Other Animals                                     |  |  |   |  |  |  |
| Gerbils   |  |  | 5   | 36   |  | 41   |
|   | †  |  |   |  |  |  |
|   | <del>                                     </del> |  |   |  |  |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and applicational Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary included by the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and case.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ( Chief Executive Officer or Legally Responsible Institutional Official )

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)
John K. Raymond / Vice President for Academic

Affairs and Provost; Professor

DATE SIGNED

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

cm/

This report is required by law (7 USC 214). Failure to report according to the regulations can, result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

See reverse side for additional information Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 56-R-0002

include Zip Code)

CUSTOMER NO. 926

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA,

FORM APPROVED OMB NO~ 0579-0036

# ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Office of Research Compliance

223 Brackett Hall, Box 345704 Clemson, SC 29634-5704 - (864) 656-4538)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
|--|---|---|--|--|---|
| 4. Dogs  | 0   | 0   | 0  | 0  | 0   |
| 5. Cats  | 0   | 3   | 0  | 0  | 3   |
| 6. Guinea Pigs                                       | 0   | 0   | 0  | 0  | 0   |
| 7. Hamsters  | 0   | 0   | 0  | 0  | 0   |
| 8. Rabbits   | 0   | 28  | 21   | 0  | 49  |
| 9. Non-Human Primates                                | 0   | 0   | 0  | 0  | 0   |
| 1 0. Sheep   | 0   | 0   | 0  | 0  | 0   |
| I 1. Pigs  | 0   | 0   | 10   | 0  | 10  |
| 12. Other Farm Animals                               |   |   |  |  |   |
| Goat   | 0   | 0   | 0  | 0  | 0   |
| 13. Other Animals                                    |   |   |  | M=   |   |
| Please see next page                                 |   |   |  |  |   |
|  |   |   |  |  |   |
|  |   |   |  |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other

| aspects of arminal care and ass.              |   |             |
|---|---|-------------|
| (Chief Executive C                            | HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional official) ove is true, correct, and complete (7 U.S.C. Section 2143) |             |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) Christian E. G. Przirembel, Ph.D. Vice President for Research                            | DATE SIGNED |

and Economic Development

(AUG 91)

**PART 1 - HEADQUARTERS** 

(Replaces VS FORM 18-23 (Oct 88), which Is obsolete

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

See reverse side for additional information. Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE I. REGISTRATION NO 56-R-0002

include Zip Code)

CUSTOMER NO

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA,

FORM APPROVED OMB NO. 0579-0036

# CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Office of Research Compliance 223 Brackett Hall, Box 345704 Clemson, SC 29634-5704 - (864) 656-4538)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets ifnecessary or use this form.) Godley Snell Research Center October 2004 E. Number of animals upon which teaching, D. Number of animals upon B. Number of C. Number of experiments, research, surgery or tests were animals being animals upor which experiments, TOTAL NO. conducted involving accompanying pain or distress which teaching, teaching, research, Animals Covered OF ANIMALS to the animals and for which the use of appropriate surgery, or tests were conditioned, or By The Animal research. held for use in experiments, or conducted involving anesthetic, analgesic, or tranquilizing drugs would Welfare Regulations (Cols. C+ have adversely affected the procedures, results, or teaching, testing, tests were accompanying pain or interpretation of the teaching, research, D + E) experiments, conducted distress to the animals experiments, surgery, or tests. (An explanation of and for which appropriate research, or involvina no the procedures producing pain or distress in these animals and the reasons such drugs were not used anesthetic, analgesic, or surgery but not pain, distress, or yet used for such use of paintranquilizing drugs were must be attached to this report) purposes relieving drugs. used. Other Animals: ln 252 Ю 252 Bats 12 12 Feral Hogs 0 14 0 Horses (Biomedical) 14 35 32 Dairy/Beef Cattle (Biomedical) Ð n 0 Skunk 1205 n Rodents 579 626 5 0 0 Opossums ASSURANCE STATEMENTS

| (Chief Executive C   | HEADQUARTERS RESEARCH FACILITY OFFICIAL  Officer or Legally Responsible Institutional official)  ove is true, correct, and complete (7 U.S.C. Section 2143) |             |
|--|---|-------------|
| SIGNATURE OF CETO. OR INSTITUTIONAL OFFICIAL  Missault Frank | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) Christian E. G. Przirembel, Ph.D. Vice President for Research and Economic Development     | DATE SIGNED |

APHIS FORM 7023A (AUG 91) (Replaces VS FORM 18-23 (Oct 88), which is obsolete

PART 1 - HEADQUARTERS

<sup>1)</sup> Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

<sup>2)</sup> Each principal investigator has considered alternatives to painful procedures

<sup>3)</sup> This faci4ty is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is affached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

<sup>4)</sup> The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

Interagency Report Control N

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OCT 202005

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. CERTIFICATE NUMBER: 56-R-0004 CUSTOMER NUMBER: 902

FORM APPROVED OMB NO. 0579-0036

Tri-County Technical College Veterinary Technology Dept P.O. Box 587 Pendleton, SC 29670

Telephone: (864) -464-1437

FACILITY LOCATIONS (Sites) - See Atached Listing

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

| REPORT OF ANIMALS                                     | USED BY OR UNDER (  | CONTROL OF RESEAR   | CH FACILITY ( Attach addition.   | al sheets if necessarv or use APHIS Form 7023A )   | <u></u>  |
|---|---|---|--|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
| 4. Dogs   |   |   | 51   |  | 51   |
| 5. Cats   | 14.600.00   |   | 58   |  | 58   |
| 6. Guinea Pigs  |   |   |  |  |  |
| 7. Hamsters   |   |   |  |  |  |
| 8. Rabbits  |   |   |  |  |  |
| 9. Non-human Primates                                 |   |   |  |  |  |
| 10. Sheep   |   |   |  |  |  |
| 11. Pigs  |   |   |  |  |  |
| 12. Other Farm Animals                                |   |   |  |  | · · · · · · · · · · · · · · · · · · ·              |
| 13. Other Animals                                     |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |
|   |   |   |  |  |  |

#### ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.

ITIONAL OFFICIAL

- This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

( Chief Executive Officer or Legally Responsible Institutional Official )

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Ronnie L. Booth, Ph.D., President

10-13-5

APHIS FORM 7023

SIGNATURE OF C.E.O, OB INSTIT

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

( AUG 91 )

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 56-R-0103

CUSTOMER NUMBER: 904

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

University Of South Carolina At Aiken

471 University Pkwy Aiken, SC 29801

NOV 172005

Telephone: (803) -641-3299

3. REPORTING FACILITY (List all locations where animals we're housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

| Psychology                 | Dept.   |       |      |    |
|----------------------------|---------|-------|------|----|
| Psychology<br>Ruth Patrick | Science | Educ. | Cent | ۹۲ |

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                       | USED BY OR UNDER O  | CONTROL OF RESEAR  | CH FACILITY ( Attach additiona   | al sheets if necessarv or use APHIS Form 7023A)  |  |
|---|---|--|--|--|--|
| A.  Animals Covered  By The Animal  Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use o pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
| 4. Dogs   | G   | 0  | 0  | 0  | 0  |
| 5. Cats   | 0   | 0  | 0  | 0  | 0  |
| 6. Guinea Pigs  | Q   | 0  | 0  | 0  | 0  |
| 7. Hamsters   | 0   | 0  | 0  | 0  | 0  |
| 8. Rabbits  | ල   | 0  | 0  | 0  | Ø  |
| 9. Non-human Primates                                   | 0   | 0  | 0  | 0  | 0  |
| 10. Sheep   | 0   | 0  | 0  | ٥  | 0  |
| 11. Pigs  | 0   | 0  | 0  | 0  | 0  |
| 12. Other Farm Animals                                  | 0   | 0  | O  | 0  | 0  |
| 13. Other Animals                                       |   |  |  |  | O  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |

#### ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) Execuble Via

11-14-09

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

See reverse side for additional information. Interagency Report Control No

1. REGISTRATION NO.

CUSTOMER NO.

0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

56-R-0105

905

FORM APPROVED OMB NO. 0579-0036

## **ANNUAL REPORT OF RESEARCH FACILITY**

(TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code) LABS OF VIRGINIA INC

95 CASTLE HALL RD P O BOX 557 YEMASSEE, SC 29945

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites) HAMPTON CENTER EARLY BRANCH, SC 29945 LABS OF VIRGINIA INC BEAUFORT COUNTY, SC 29945

| REPORT OF ANIMALS USED BY                             | OR UNDER CONTROL O  | F RESEARCH FACILITY   | (Attach additional sheets if neces  | ssary or use APHIS FORM 7023A )  |   |
|---|---|---|---|--|---|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
| 4. Dogs   |   |   |   |  |   |
| 5. Cats   |   |   |   |  |   |
| 6. Guinea Pigs  |   |   |   |  |   |
| 7. Hamsters   |   |   |   |  |   |
| 8. Rabbits  |   |   |   |  | <u></u>                                   |
| 9. Non-Human Primates                                 | 5382  |   | 325   |  | 325                                       |
| 10. Sheep   |   |   |   |  |   |
| 11. Pigs  |   |   |   |  |   |
| 12. Other Farm Animals                                |   | ****  |   |  |   |
| 13. Other Animals                                     |   |   |   |  |   |
|   |   |   |   |  |   |
|   |   |   |   |  |   |
|   |   |   |   |  |   |
| ASSURANCE STATEMENTS                                  |   |   |   |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL                        |  |             |  |  |  |
|---|--|-------------|--|--|--|
| (Chief Executive Officer or Legally Responsible Institutional official)         |  |             |  |  |  |
| I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) |  |             |  |  |  |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL                                   | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |  |  |  |
| Greg Westergaard  | Greg Westergaard, Ph.D., President & CEO                         | 11/11/2005  |  |  |  |

additional information.

result in an order to cease and desist and to be subject to penalties as provided for in Section 211

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 56-R-0106

CUSTOMER NUMBER: 1760

FORM APPROVED OMB NO. 0579-0036

P.02/02

Newberry College ANNUAL REPORT OF RESEARCH FACILITY Vet Technology Program 2100 College Street Newberry, SC 29108

Telephone: (803) -321-5636

DEC 052005

1. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS (Sites) - See Alached Listing

| REPORT OF ANIMALS                                     | LISÉD BY OR LINDER  | CONTROL OF BESEAS   | OCH EACH ITY / Attack addition   | al sheets if necessary or use APHIS Form 7023A )  |  |
|---|---|---|--|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of snimal being bred, conditioned, or held for use in teaching, teating, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, aurgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of unimals upon which teaching, experiments, research, surgery or teats were conducted involving accompanying pain or distress to the unimals and for whithe use of appropriate anesthetic, analgeaic, or tranquility drugs would have adversely affected the procedures, resion interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the ressession drugs were not used must be attached to this report | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
| 4. Dogs   |   | 17  | 15   |   | <i>3</i> 2   |
| 5. Cats   |   | 9   | 6  |   | 15 .   |
| 6. Guinea Pigs  |   |   |  |   | 1/   |
| 7. Hamsters   |   |   |  | 4- 4-   |  |
| 8. Rabbits  |   |   |  |   |  |
| 9. Non-human Primetes                                 |   |   |  |   | <del></del>  |
| 10. Sheep   |   |   | <b>***</b>   |   |  |
| 11. Pigs  |   |   |  |   |  |
| 12. Other Farm Animals                                |   |   |  | 713   |  |
|   |   |   |  |   |  |
| 3. Other Animals                                      |   |   | <del></del>  |   |  |
| ***   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  |   |  |
|   |   |   |  | L   |  |

#### ASSURANCE STATEMENTS

- Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anastatic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report, in addition to identifying the IACUC-approved exceptions, this summary int brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY ( Chief Executive                    | / HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL  SCRUTT | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Typo or Print)                                 | DATE SIGNED |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.)

(AUG 91)

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21

See attached form for additional information Interagency Report Control

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER:

56-R-0109 CUSTOMER NUMBER: 11563

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Trident Technical College Vet Tech Program 7000 Rivers Ave P.O. Box 118067 Charleston, SC 29423

3. REPORTING FACILITY ( List all locations where enimals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS ( Sites ) - See Atached Listing

| 0<br>0<br>0 | 87<br>50<br>12 | 0<br>0<br>0 | 87<br>50<br>12 |
|-------------|----------------|-------------|----------------|
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| 0           | 12             |             |                |
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| 0           | 0              | 0           | 0              |
| 0           | 0              | 0           | 0              |
|             |                | 0 0         | 0 0 0 0        |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquillizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary inc brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

( Chief Executive Officer or Legally Responsible Institutional Official )

SIGNATURE OF CIE.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

Mary Thornley, Ed.D., President

DATE SIGNED

APHIS FORM 7/023

ces VS FORM 18-23 (OCT 88), which is obsolete.)

( AUG 91 )

NOV 302005

See attached form for additional information.

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 56-R-0110
CUSTOMER NUMBER: 10055

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Technical Services Specialists Inc 6133 Mount Carmel Rd. Walterboro, SC 29488

Telephone: (843) -538-1014

3. REPORTING FACILITY ( List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary )

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER O  | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | I sheets if necessarv or use APHIS Form 7023A )  |  |
|---|---|---|--|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
| 4 Dogs  |   | 4910  | 49   |  | 49   |
| 5. Cats   |   |   | ,  |  |  |
| 6. Guinea Pigs  |   | 100 P   | 100  |  | 100  |
| 7. Hamsters   |   |   |  |  | 0  |
| 8. Rabbits  |   | 220R  | 720  |  | 120  |
| 9. Non-human Primates                                 |   | 414 R   | 114  |  | 114  |
| 10. Sheep   |   | 4   |  |  | 0  |
| 11. Pigs  |   | 270   | 7  |  | 7  |
| 12. Other Farm Animals                                |   |   |  |  | <u></u>  |
| 13. Other Animals                                     |   |   |  |  | •  |
|   |   |   |  |  |  |
| ACCURANCE STATEMENTS                                  |   |   |  |  |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| <br>CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL              |
|---|
| ( Chief Executive Officer or Legally Responsible Institutional Official ) |

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

RICHARD H. DAVIS CO-DUMOR

DATE SIGNED

NOV 102005

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE

ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 56-R-0111 **CUSTOMER NUMBER:** 16591

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Francis Marion University Box 100547 Florence, SC 29501

Telephone: (843) -661-1281

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | · · · · · · · · · · · · · · · · · · ·   |   |  | al sheets if necessary or use APHIS Form 7023A 1   | F.                                 |
|---|---|---|--|--|------------------------------------|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report.) | TOTAL NUMBER OF ANIMALS  ( COLUMNS |
| 4. Dogs   | 0   |   |  |  | 0                                  |
| 5. Cats   | 0   |   |  |  | 0                                  |
| 6. Guinea Pigs  | 0   | _   |  |  | 0                                  |
| 7. Hamsters   | 0   |   |  |  | 0                                  |
| 8. Rabbits  | 0   |   |  |  | 0                                  |
| 9. Non-human Primates                                 | 0   |   |  |  | 0                                  |
| 10. Sheep   | 0   |   |  |  | 0                                  |
| 11. Pigs  | 0   |   |  |  | 0                                  |
| 12. Other Farm Animals                                | 0   |   |  |  | 0                                  |
|   |   |   |  |  |                                    |
| 13. Other Animals                                     | 0   |   |  |  | 0                                  |
|   |   | - Marian  |  |  |                                    |
|   |   |   |  |  |                                    |
|   |   |   |  |  |                                    |

### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

|   | ON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL utive Officer or Legally Responsible Institutional Official) |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFIGIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)   | DATE SIGNED |
| ( ) ( it and ) ! ( the same                   | Richard N. Chapman, Provost  | 11/8/05     |

(AUG 91)

(Replaces VS FORM 18-23 CT 88), which is obsolete.)

# Customer ID and Site Address:

ID: 16591

Leatherman And Mcnair Science Bldgs Francis Marion University 5130 E. Palmetto Street Florence, SC 29506 County: Florence Telephone

The annual report last year erroneously listed the proposed number of hamsters to be acquired. We actually had only one hamster on site. It died of old age this year. We currently have no hamsters on site.

This report is required by law (? USC 21 43) Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

Set reverse side for additionalinformation

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1 REGISTRATION NO .

56-R-0112

FORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip Code)

College of Charelston

66 George Street

Charleston, SC 29424

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional

FACILITYLOCATIONS (Sites)

4th Floor, Science Center

59 Coming Street

Grice Marine Lab

| A. Animals Covered By The Animai Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used | E. Number of animals upon which teaching experiments, research, surgery, or lests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in those animals and the reasons such drugs were not used must be attached to this report) | F.  TOTALNO OF ANIMALS  (Cols. C + D + E) |
|--|--|---|--|--|---|
| 4. Dogs  | 0  | 0   | 0  | 0  | 0   |
| 5. Cats  | 0  | 0   | 0  | 0  | 0   |
| 6. Guinea Pigs                                       | 0  | 0   | 0  | 0  | 0   |
| 7. Hamsters  | 0  | 0   | 0  | 0  | 0   |
| 8. Rabbits   | 0  | 0   | 0  | 0  | 0   |
| 9. Non-human Primates                                | 0  | 0   | 0  | 0  | 0   |
| 10. Sheep  | 0  | 0   | 0  | 0  | 0   |
| 11., Pigs  | 0  | 0   | 0  | 0  | 0   |
| 12. Other Farm Animals                               | 0  | 0   | 0  | 0  | 0   |
| 13 Other Animals                                     | ·  |   |  |  |   |
| Rice Rats  | 0  | 79  | 0  | 0  | 79  |
| Bottlenose Dolphins                                  | 0  | 0   | 45   | 0  | 45  |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarianfor this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

|  | HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official)                            |             |
|--|---|-------------|
| I certify that the                         | above is true, correct, and complete (7 U.S.C. Section 2143).   |             |
| SIGNATURE OF CEO OF INSTITUTIONAL OFFICIAL | NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL (Type or Print)  Elise B. Jorgens, Provost & Senior VP for Academic Affairs | DATE SIGNED |

APHIS FORM 7023

# DEC 13 2005

This report is required by law (? USC 21.43) Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

Set reverse side for additional information

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

1. REGISTRATION NO. 56-R-0113

ORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip code)

Gen Phan, Inc.

871 Lowcountry Blwd

Mount Pleasant, SC 29464

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional

FACILITYLOCATIONS (Sites)

11sted in #2

| held<br>teach<br>expe<br>resea<br>surge<br>yet us | arch, or<br>ery but not<br>sed for such | whice rese expetest cond involvable.                                 | ving no<br>distress. o<br>of pain-  | teachin<br>surgery<br>conduct<br>accomp<br>distress<br>and for<br>anesthe  | which appropriate<br>etic, analgesic, or  | conducted to the an anesthetic have adviced interpreta experime the procesulations.   | edures producing pain or distress in those and the reasons such drugs were not used  | OF (Co   | OTALNO<br>ANIMALS<br>IIs. C +<br>) + E)   |
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|   | resea<br>surga<br>yeatus<br>purpos      | experiments, research, or surgery but not yet used for such purposes | research, or invol<br>surgery but not pain,<br>yet used for such use t<br>purposes reliev | research, or surgery but not yet used for such purposes involving no pain, distress, or use of pain-relieving drugs. | research, or surgery but not yet used for such purposes involving no and for anesth use of pain-relieving drugs. and for used | research, or surgery but not pain, distress, or used for such purposes involving no and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used | research, or surgery but not yet used for such purposes relieving drugs.  Controlled and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used to such purposes relieving drugs. | research, or surgery but not yet used for such purposes relieving drugs.  and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used relieving drugs.  and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used rust be attached to this report) | research, or surgery but not yet used for such purposes relieving drugs.  and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used for such purposes relieving drugs.  and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used must be attached to this report)  experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in those animals and the reasons such drugs were not used must be attached to this report) |

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- 4) The attending veterinarianfor this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| (Chief Executive                           | / HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) eabove is true, correct, and complete (7 USC Section 2143). |          |
|--|--|----------|
| SIGNATURE OF CEO OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL (Type of Print)  Tara Denton  Business Manager   | 11/28/05 |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88) which is obsolete

\* Please see attached Inspection Report

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 56-V-0002 CUSTOMER NO. 985

FORM APPROVED OMB NO. 0579-0036

## ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

OGAWA

RALPH H. JOHNSON DEPT OF VAMC 109 BEE STREET CHARLESTON, SC 29401

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

VA MEDICAL CENTER CHARLESTON, SC 29401

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report) | F.  TOTAL NO.  OF ANIMALS  (Cols. C +  D + E) |
|--|---|---|---|--|---|
| 4. Dogs  |   |   |   |  |   |
| 5. Cats  |   | 30  | 75  |  | 105   |
| 6. Guinea Pigs                                       |   |   | 31  |  | 31  |
| 7. Hamsters  |   |   |   |  | * .   |
| 8. Rabbits   |   |   | 2   |  | 2   |
| 9. Non-Human Primates                                |   |   |   |  |   |
| 10. Sheep  |   |   |   |  |   |
| 11. Pigs   |   |   |   |  |   |
| 12. Other Farm Animals                               |   |   |   |  |   |
| 13. Other Animals                                    |   |   |   |  |   |
|  |   |   |   |  |   |
|  |   |   |   |  |   |
|  |   |   |   |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

|   | BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  |             |
|---|---|-------------|
|   | Officer or Legally Responsible Institutional official) above is true, correct, and complete (7 U.S.C. Section 2143) |             |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)  | DATE SIGNED |
| William A Mountcastle, CHE                    | William Mountcastle, CHE  | 11/10/2005  |

APHIS FORM 7023 (AUG 91) (Replaces VS FORM 18-23 (Oct 88), which is obsolete

**PART 1 - HEADQUARTERS** 

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150.

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 56-V-0003 CUSTOMER NO. 986 FORM APPROVED

# ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)
 BROWN

BROWN
GARNERS FERRY ROAD
COLUMBIA, SC 29209

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS(sites)

WJB DORN VETERANS HOSPITAL

COLUMBIA, SC 29209

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

B. Number of D. Number of animals upon thich teaching, F.

| A.                                     | B. Number of                    | C. Number of                           | D. Number of animals upon                            | E. Number of animals upon which teaching,  | F.                |
|--|---------------------------------|--|--|--|-------------------|
|  | animals being                   | animals upon                           | which experiments.                                   | experiments, research, surgery or tests were   |                   |
| Animals Covered                        | bred,                           | which teaching,                        | teaching, research,                                  | conducted involving accompanying pain or distress  | TOTAL NO.         |
| By The Animal                          | conditioned, or                 | research,                              | surgery, or tests were                               | to the animals and for which the use of appropriate  | OF ANIMALS        |
| Welfare Regulations                    | held for use in                 | experiments, or                        | conducted involving                                  | anesthetic,analgesic, or tranquilizing drugs would   | (Cols. C+         |
|  | teaching, testing,              | tests were                             | accompanying pain or                                 | have adversely affected the procedures, results, or  | (Cois. C+<br>D+E) |
|  | experiments,                    | conducted                              | distress to the animals<br>and for which appropriate | interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of | D+E)              |
|  | research, or<br>surgery but not | involving no                           | and for which appropriate anesthetic, analgesic, or  | the procedures producing pain or distress in these   |                   |
|  | vet used for such               | pain, distress, or use of pain-        | tranquilizing drugs were                             | animals and the reasons such drugs were not used   |                   |
|  | purposes.                       | relieving drugs.                       | used.  | must be attached to this report)   |                   |
| ~····································· |                                 |  |  |  |                   |
| 4. Dogs                                |                                 |  |  |  |                   |
| 5. Cats                                |                                 |  |  |  |                   |
| 6. Guinea Pigs                         |                                 |  |  |  |                   |
| 7. Hamsters                            |                                 |  |  |  |                   |
| 7. Harristers                          |                                 | ······································ | <del> </del>   |  |                   |
| 8. Rabbits                             |                                 |  | 194  |  | 194               |
| 9. Non-Human Primates                  |                                 |  |  |  |                   |
| 10. Sheep                              |                                 |  |  |  |                   |
| 11. Pigs                               |                                 |  |  |  |                   |
| 12. Other Farm Animals                 |                                 |  |  |  |                   |
|  |                                 |  |  |  |                   |
| 13. Other Animals                      |                                 |  |  |  |                   |
| TO. Carlot rannale                     |                                 | · · · · · · · · · · · · · · · · · · ·  |  |  |                   |
|  |                                 |  |  |  |                   |
|  |                                 |  |  |  |                   |
|  | 1                               |  | 1  |  | 1                 |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all the exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  (Chief Executive Officer or Legally Responsible Institutional official)  I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) |  |             |
|--|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED |
| Brian Heckert  | Brian Heckert, Medical Center Director                           | 11/29/2005  |